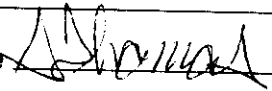


<b>No. W 17979</b>	<b>Due no later than February 28, 2006</b> <b>Annual Report Form</b>		<b>2. Registered Agent and Office NO PO BOX</b>																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	<b>1. Mailing Address - Correct in this box, if applicable</b>  THOMAS WORKS LLC 365 LINCOLN DR IDAHO FALLS, ID 83401		GORDON L THOMAS 365 LINCOLN DR IDAHO FALLS, ID 83401																		
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>			<b>3. New Registered Agent Signature</b>																		
<b>4. Limited Liability Companies: Enter Names and Addresses of Managers.</b> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Manager</td> <td>Gordon L Thomas</td> <td>365 Lincoln Dr</td> <td>Idaho Falls</td> <td>ID</td> <td>83401</td> </tr> <tr> <td>Manager</td> <td>Sarah B Thomas</td> <td>365 Lincoln Dr</td> <td>Idaho Falls</td> <td>ID</td> <td>83401</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Manager	Gordon L Thomas	365 Lincoln Dr	Idaho Falls	ID	83401	Manager	Sarah B Thomas	365 Lincoln Dr	Idaho Falls	ID	83401
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<b>5. Organized Under the Laws of:</b>  IDAHO W 17979		<b>6.</b> Signature  Date <u>12-16-05</u> Name (Typed or Printed) <u>Sarah B Thomas</u> Title <u>Manager</u>																			

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Do not Tape or Staple

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